Foster Family Home - Corrective Action Report

Foster Family Home Records [17-1454-52] 52.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department; Comment: 52.(c)(2) Client #2 Current service plan not present in the home. Compliance Manager Date	Provider ji:	1-160004	*						. 1
Walpahu HI 96797 Begin Date: 12/6/2016 End Date:	Home Name:	Leonida .	Agasi	d CNA	Review ID:	1-160004-2	2		3
Foster Family Home Required Certificate [17-1454-6] 6.(d)(1) Comply with all applicable requirements in this chapter; and Comment. 6.(d)(1) Home visit made on 12/8/2016 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 1/8/2017. 6.(d)(1) See applicable sections of this review. Foster Family Home Background Checks [17-1454-7.1] 7.1.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS; Comment 7.1.(a)(1) CG#6 Second set of fingerprinting not present in the home. Foster Family Home Fire Safety [17-1454-45] 45.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the festing of smoke defectors. Comment 45.(a) No monthly fire drills conducted, documented, and maintained in the home. Foster Family Home Insurance Requirements [17-1454-49] 49.(a)(1) General; Comment 49.(a)(1) GG#5 Liability insurance not present in the home. Foster Family Home Records [17-1454-52] 52.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department; Comment Comment Compliance Manager Date Compliance Manager Date	94-1166 Hina St				Reviewer.			,	
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12-06-2016	52.(c)(2) Client i	#2 Curren	t servi	ice plan not presen	t in the home.				
12-06-2016		Compl	iance	Manager			- Date		-
12-06-2016			1	,					
Primary Care Giver		Primar	v Car	e Giver			- 12-	0000001016	<u> </u>

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Written Plan of Correction Leonida L. Agasid 94-1166 Hina St., Waipahu Hi., 96797

01/02/2017

The statement made on this plan of correction are not on admission to and do not constitute an agreement with the alleged deficiencies therein. To remain in the compliance with all the State regulations, the CCFFH has taken or will take the actions set forth in the following plan of correction. The plan of correction constitutes the CCFFHs alleged of deficiencies cited have been or will be corrected by the date or dates indicated.

Background checks

- 7.1.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;
- 7.1.(a)(1) #6 First set of fingerprinting on July 2014 is re-located and filed in the personnel file. Second set of fingerprinting on 11/18/2015 is present at the time of home visit on 12/06/2016. The home will make sure that remains in the home binder at all times so this will not happen again in the future.

Fire Safety

- 45.(a) The home shall conduct, document, and maintain a record in the home, of unannounced fire drills at different times of the day, evening, and night. The home will follow the Hawaii Administrative Rule #45 (a). Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.
- 45.(a) Fire drill conducted on 12/06/2016 @ 5:00pm, by Primary Caregiver, no problem noted. Home fire drills should be conducted by all caregivers at least every month at different time of the day. And make sure that all fire drills will be documented and maintained in the home so this will not happen again and that all caregivers will be trained to implement and conduct appropriate emergency procedures in the event of a fire.

Insurance Requirements

49.(a) General Liability Insurance

49.(a) CG#5 Liability Insurance for November 2016 - November 2017 is re-located and filed in the personnel file. The home will make sure that remains in the home binder at all times so this will not happen again in the future.

Records

52.(c)(2) Clients current individual service plan, and when appropriate plan approved by the department.

52.(c)(2) Client #2 Current service plan on 10/25/2016 is relocated and filed in the client's binder. The home will make sure to check and work with the case management agency to make sure that all clients should have current service plan so this will not happen again in the future.

Leonida L. Agasid

CCFFH

94-1166 Hina St.

Waipahu, Hl. 96701